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DECLARATION		Attorney Docket Number		JBP5001NP			
POWER	AND POWER OF ATTORNEY FOR UTILITY OR DESIGN		First Name	d Inventor	M. Aleles et al.		
			Tustivanie		E IF KNOWN		
	T APPLICATION			COMPLET	E IF KINOVIN		
	7 CFR 1.63)		Application	Number			
Declaration Submitted wire Initial Filing	th 🗵 Declaration Sul OR Initial Filing (S	Surcharge	Filing Date				
	(37 CFR 1.16)		Group Art Unit				
			Examiner Name				
As a below named invento	or, I hereby declare tha	at:					
My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
METHOD FOR PROVIDING PERSONALIZED PROGRAMS TO RETAIL CUSTOMERS (Title of the Invention)							
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign F (MM/DD	iling Date VYYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
Additional foreign applie	ation numbers are liste	d on a cupple	montal priori	y data shoot PT	O/SR/02B attached hereto:		

DECLARATION - Utility or Design Patent Application							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s) Filing Date (MM/DD/YYYY)							
60/422,724							
Lhershy claim the hanefit under Title 35 Lt	nited States Code, \$120 of any United State	es application(s) listed below and insofar					
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:							
Application Serial No.	Filing Date	Status					
I hereby appoint:							
Practitioners at Customer Number  AND	Place Customer Number Bar Code Label Here						
Practitioner(s) named below: Name Registration Number							
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.							
Address all telephone calls to Andrea L. Colby at telephone number (732) 524-2792.							
Customer Number  Direct all correspondence to:							
Name:							
Address:							
Address:							
City:	State:	ZIP					
Country	Telephone:	Fax:					

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:	A pr	etition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Margaret		Family Name or Surname Aleles			
Inventor's Signature				Date	7
Residence: City Gladstone	State New Jers	sey	Count	try USA Citizenship USA	
Mailing Address 29 Mosle Road					
City Gladstone	State New Jers		ZIP 07		Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SECOND INVENTOR:	□ А рє	tition has	been file	ed for this unsigne	ed inventor
Given Name (first and middle [if any]) Steven A.		Family Name or Surname Shaya			
Inventor's Signature				Date	
Residence: City Highlands	State New Jers	sey	Country USA		CitizenshipUSA
Mailing Address 144 Portland Road					
City Highlands	State New Jers		ZIP 07		Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF THIRD INVENTOR:	□ А ре	tition has I	been file	ed for this unsigne	ed inventor
Given Name (first and middle [if any]) Kathryn Dean		Family Name or Surname Luedtke		Luedtke	
Inventor's Signature				Date	
Residence: City Doylestown	State Pennsylv	State Pennsylvania		ry USA	CitizenshipUSA
Mailing Address 4802 Kings Road					
City Dovlestown	State Pennsylvania		ZIP 18901		Country USA

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF THIRD INVENTOR:	AME OF THIRD INVENTOR:   A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) Mario A.	Family Name or Surname Orlandi					
Inventor's Signature			1	Date	<del>-</del>	
Residence: City Stanton	State New Jers	sey	Country USA		Citizenship USA	
Mailing Address P.O. Box 250						
City Stanton	State New Jersey		ZIP 08885-0250		Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF THIRD INVENTOR:  A petition has been filed for this unsigned inventor					ed inventor	
Given Name (first and middle [if any]) Jurgen		Family or Surn		Fey		
Inventor's Signature				Date		
Residence: City Skillman State N		ate New Jersey		ry USA	Citizenship Germany	
Mailing Address 18 Hunters Pass						
City Skillman	State New Jers	State New Jersey		3558	Country USA	